

NEED OF COLUMBIA, COLUMBIA, S. C.

IN CASE OF TWINS OR TRIPLETS, WHEN BREASTING, THIS IS A PERMANENT RECORD, AND MARK THE FIRST-BORN, No. 1. THE OTHER, No. 2, etc., in question 5.

(1) PLACE OF BIRTH

County of BeaufortTownship of 6

OR

Inc. Town of Paris Island

OR

City of Paris Island

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

File No.—For State Registrar Only

41016

Registration District No. 600 Registered No. 55

(For use of Local Registrar)

City of Paris Island (No. 600 St. 55 Ward 55)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Harleen Louise

If child is not yet named, make supplemental report as directed

(3) BOY OR GIRL <u>Girl</u>	(4) Twin or Triplet? <u>To be answered only in case of Twins or Triplets</u>	(5) Number in order of birth <u>1</u>	(6) Are Parents Married? <u>yes</u>	(7) DATE OF BIRTH <u>Dec. 15, 1922</u> (Name of Month) (Day) (Year)
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FATHER.

(8) FULL NAME William C. Kane(9) PRESENT POSTOFFICE OF FATHER Paris Island S.C.(10) COLOR OR RACE white (11) AGE AT LAST BIRTHDAY 25 (Years)(12) BIRTHPLACE Penn.(13) OCCUPATION Draftsman(20) Number of children born to mother, including present birth One

MOTHER.

(14) NAME BEFORE MARRIAGE Eleanor Kelsey(15) PRESENT POSTOFFICE OF MOTHER Paris Island S.C.(16) COLOR OR RACE white (17) AGE AT LAST BIRTHDAY 22 (Years)(18) BIRTHPLACE Penn.(19) OCCUPATION Housewife(21) Number of children of this mother now living, including present birth One

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

(22) I hereby certify that I attended the birth of this child, who was Born alive at 7 P.M. on the date above stated. (Born alive or stillborn) (Hour A.M. or P.M.)(23) (Signature) Richard B. Shea

(24) State whether Physician or Midwife

(25) Address of Physician or Midwife

Given name added from a supplemental report

(26) Witness H. M. U.S. Navy (Signature of Witness necessary only when question 23 is signed by mark)(27) Filed Dec 19, 1922 (28) H. Kessen Local Registrar

*When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.